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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Michael	Deborah
	your government-issued picture identification (for example, your driver's license or passport).	First name	First name
		Middle name	Middle name
	Bring your picture identification to your	Albano	Albano
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7924	xxx-xx-2620

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Debtor 1 Michael Albano
Debtor 2 Deborah Albano

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	270 Mallard's Cove	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Will County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Michael Albano

Deb	otor 2 Deborah Albano				Case number (if known)			
Par	Tell the Court About	Your Bankruptcy C	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how your order. If your a pre-printed	ou may pay. Typically, if you a attorney is submitting your pa address.	re paying the fee yayment on your be	ck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with			
			y the fee in installments. If y ee <i>in Installment</i> s (Official Forr		ion, sign and attach the Application for Individuals to Pay			
		I request the but is not recapplies to yo	at my fee be waived (You ma quired to, waive your fee, and r ur family size and you are una	y request this optionary do so only if yable to pay the fee	on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out icial Form 103B) and file it with your petition.			
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
	•	District		When	Case number			
		District		When	Case number			
		District		When	Case number			
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debtor			Relationship to you			
		District		_ When	Case number, if known			
		Debtor			Relationship to you			
		District		When	Case number, if known			
11.	Do you rent your residence?	□ No. Go to	line 12.					
	. Joseph .	■ Yes. Has ye	our landlord obtained an evicti	on judgment again	st you and do you want to stay in your residence?			
			No. Go to line 12.					
			Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About an Eviction	Judgment Against You (Form 101A) and file it with this			

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Debtor 1 Michael Albano

Deb	otor 2 Deborah Albano				Case number (if known)
Par	Report About Any Bu	ısinesses	You Owr	າ as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	9
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your			court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	I am ı	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have An	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	<u> </u>	the hazard?	, , , , , , , , , , , , , , , , , , ,
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	- •				Number, Street, City, State & Zip Code

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Debtor 1 Michael Albano

Debtor 2 Deborah Albano Case number (if known)

Part 5: Explain Your E

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-24429 Doc 1 Filed 08/15/17 Entered 08/15/17 16:38:06 Desc Main Document Page 6 of 59

	otor 1 otor 2	Michael Albano Deborah Albano		Boodinent	Case	e number (if known)			
Part	t 6:	Answer These Questi	ons for Re	oorting Purposes					
	What kind of debts do you have?		16a. i	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b.					
			16b.	■ Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. □ No. Go to line 16c.					
				☐ Yes. Go to line 17. State the type of debts you owe that	at are not consumer debts or b	business debts			
17.		you filing under oter 7?	□ No.	am not filing under Chapter 7. Go	to line 18.				
	after prop adm are p be a distr	ou estimate that any exempt erty is excluded and inistrative expenses paid that funds will vailable for ibution to unsecured itors?	— 163.	am filing under Chapter 7. Do you are paid that funds will be available No		npt property is excluded and administra reditors?	tive expenses		
18.		many Creditors do estimate that you ?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	estir	much do you nate your assets to orth?	\$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 million	on	billion		
20.		much do you nate your liabilities e?	\$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 million	on	billion		
Part	t 7:	Sign Below							
For	you		If I have ch	nosen to file under Chapter 7, I am	aware that I may proceed, if e	he information provided is true and correligible, under Chapter 7, 11,12, or 13 and I choose to proceed under Chapter	of title 11,		
If no attorney represents me and				ey represents me and I did not pay	I did not pay or agree to pay someone who is not an attorney to help me fill out this ead the notice required by 11 U.S.C. § 342(b).				
			I understar		ealing property, or obtaining m	ode, specified in this petition. money or property by fraud in connection p to 20 years, or both. 18 U.S.C. §§ 152			
				el Albano	/s/ Debora				
			Michael A Signature		Deborah A Signature of				
			Executed	August 15, 2017 MM / DD / YYYY	Executed or	August 15, 2017 MM / DD / YYYY			

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Page 7 of 59 Document Michael Albano Debtor 1 Debtor 2 **Deborah Albano** Case number (if known) I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed For your attorney, if you are represented by one under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) If you are not represented by and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the an attorney, you do not need schedules filed with the petition is incorrect. to file this page. /s/ Julie Gleason Date August 15, 2017 Signature of Attorney for Debtor MM / DD / YYYY Julie Gleason Printed name Gleason & Gleason Firm name 77 W Washington, Ste 1218 Chicago, IL 60602 Number, Street, City, State & ZIP Code

Email address

Contact phone (312) 578-9530

6273536Bar number & State

troy@chicagobk.com

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	17(7(31111)	HI PAUE O UL DA	
mation to identify your	case:		
Michael Albano			
First Name	Middle Name	Last Name	
Deborah Albano			
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Michael Albano First Name Deborah Albano First Name	Michael Albano First Name Middle Name Deborah Albano First Name Middle Name	Michael Albano First Name Middle Name Last Name Deborah Albano First Name Middle Name Last Name Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page

		Your a	
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	205,680.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	120,626.12
	1c. Copy line 63, Total of all property on Schedule A/B	\$	326,306.12
Paı	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	196,565.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	88,770.00
	Your total liabilities	\$	285,335.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,232.67
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,232.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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		Document	Page 9 of 59	
Debtor 1	Michael Albano		9	
Debtor 2	Deborah Albano		Case number (if known)	

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,906.67

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Cas	se 17-24429	Doc 1		08/15/17 ument	Entered 08/15/17	7 16:38:06	Desc	Main
Fill ir	this inform	nation to identify y	our case and t			1 7000. 107 (11.5)			
Debto	or 1	Michael Albar	-	lle Name		Last Name			
Debto (Spous	or 2 e, if filing)	Deborah Alba First Name		lle Name		Last Name			
Unite	d States Ban	nkruptcy Court for th	ne: NORTHE	RN DISTR	RICT OF ILLIN	NOIS			
Case	number					-			Check if this is an amended filing
Sc	hedule	rm 106A/B e A/B: Pro	<u> </u>	t an asset (only once If a	an asset fits in more than one	category list the a	eset in the	12/15
nink it nform	t fits best. Be ation. If more r every quest	e as complete and ac space is needed, att ion.	curate as possik ach a separate s	ole. If two r sheet to th	married people is form. On the	e are filing together, both are e e top of any additional pages, on or Have an Interest In	qually responsible	e for supp	ying correct
. Do	you own or ha	ave any legal or equi	table interest in	any reside	ence, building,	land, or similar property?			
	No. Go to Part	2.							
1.1 	Yes. Where is 270 Mallaro Street address, if	, , ,	ption	What i	is the property Single-family h Duplex or mult		the amount of any	secured cl	s or exemptions. Put aims on <i>Schedule D:</i> Secured by <i>Property</i> .
						or cooperative	Creditors wito ria	ve Claims	secured by 1 Toperty.
_	Beecher	IL State	60401-0000 ZIP Code		Land Investment pro	or mobile home	Current value of entire property? \$205,686	ŗ	current value of the ortion you own? \$205,680.00
					Timeshare Other	in the property? Check one		ple, tenanc	ownership interest by by the entireties, or
					Debtor 1 only				
_	Will			- 📙	Debtor 2 only				
,	County			_	Debtor 1 and I At least one of	Debtor 2 only f the debtors and another	Check if this (see instruction		inity property
					information yo	ou wish to add about this item on number:	, such as local		
						rom Part 1, including any o			\$205,680.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Debt		Deborah All			Case number (if known)	
3. C a	ırs, var	ns, trucks, trac	tors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
					Do not do dont occ	ward deleter an averaging a Dut
3.1	Make			Who has an interest in the property? Check one		cured claims or exemptions. Put secured claims on Schedule D:
	Mode			■ Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:			Debtor 2 only	Current value of	
		ximate mileage:	147000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		information:		At least one of the debtors and another		
	WOLC	or Vehicle:		☐ Check if this is community property (see instructions)	\$18,825	5.00 \$18,825.00
					Do not doduct soo	cured claims or exemptions. Put
3.2	Make			Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Mode			Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2009	445000	Debtor 2 only	Current value of	the Current value of the
		ximate mileage:	115000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other	information:		At least one of the debtors and another		
				Check if this is community property (see instructions)	\$6,000	9.00 \$6,000.00
5 A				n for all of your entries from Part 2, includin that number here		\$24,825.00
Don't 1	D	aailaa Vassa Baasa	onal and Household Ite			
Part Do y				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	xample No		furnishings nces, furniture, linens	, china, kitchenware		
	Yes. I	Describe				
			Misc. Househol tables, chairs, s	d Goods (Bedroom Furniture, Kitchen <i>i</i> ofas)	Appliances,	\$1,100.00
	No	s: Televisions a	and radios; audio, vide I phones, cameras, m	eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; music c	ollections; electronic devices
			Consumer Elec	tronics (Including Televisions, Radios,	Computers,	
			Games, Phones		· ·	\$350.00

Official Form 106A/B Schedule A/B: Property page 2

Case 17-24429 Doc 1 Filed 08/15/17 Entered 08/15/17 16:38:06 Desc Main Document Page 12 of 59 Debtor 1 Michael Albano Debtor 2 **Deborah Albano** Case number (if known) 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Used Clothing \$50.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$1,000.00 Misc. Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No

Official Form 106A/B Schedule A/B: Property page 3

Cash on Hand

\$20.00

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Debtor 1 Debtor 2	Deborah Albano		Case number (if known)	
_	es: Checking, savings, o		counts; certificates of deposit; shares in credit unions, brokerage houses, and oth s with the same institution, list each.	er similar
□ No ■ Yes			Institution name:	
	17.1.	Checking	First Community Bank and Trust	\$2,879.48
	17.2.	Savings	First Community Bank	\$300.00
	17.3.		Name on Daughter's Account Minor	\$0.00
Exampl	mutual funds, or public es: Bond funds, investme		rokerage firms, money market accounts	
□ No ■ Yes		Institution or issuer	name:	
		1 Share Disney		\$101.64
20. Governi Negotia Non-neg ■ No □ Yes. G 21. Retirem Exampl □ No	ment and corporate bookble instruments include proportion gotiable instruments are Sive specific information lss: ent or pension accounties: Interests in IRA, ERIS	me of entity: Inds and other negoersonal checks, cathose you cannot trop about them uer name: Is SA, Keogh, 401(k),	% of ownership: otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them. 403(b), thrift savings accounts, or other pension or profit-sharing plans Institution name: Teacher Retirement - 100% exempt	\$50,000.00
			Retirement Account	\$40,000.00
Your sh Exampl ■ No		ts you have made s	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual:	
■ No	•		ey to you, either for life or for a number of years)	
			qualified ABLE program, or under a qualified state tuition program.	
■ No □ Yes			on. Separately file the records of any interests.11 U.S.C. § 521(c):	
Official Form			Schedule A/B: Property	page 4

		Case 17-244	429 D	oc 1	Filed 08/15/17 Document	Entere Page 1	ed 08/15/17 16:3 .4 of 59	8:06	Desc Main
	btor 1 btor 2	Michael Albano Deborah Albano					Case number (if known)	
	■ No	equitable or future Give specific informa			rty (other than anythin	g listed in l	line 1), and rights or pov	vers exer	cisable for your benefit
	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No								
27.	 Yes. Give specific information about them Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them 								
Мо	oney or p	property owed to yo	ou?						Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you Give specific informa	ation about t	them, inc	luding whether you alre	ady filed the	e returns and the tax years	S	
	Examp ■ No	support bles: Past due or lump Give specific informa		ony, spou	ısal support, child suppo	ort, mainten	ance, divorce settlement,	property s	ettlement
	Examp ■ No	mounts someone of les: Unpaid wages, of benefits; unpaid Give specific informa	disability ins I loans you			efits, sick pa	ay, vacation pay, workers	;' compens	sation, Social Security
		ts in insurance polioles: Health, disability		urance; h	ealth savings account (HSA); credit	t, homeowner's, or renter'	s insuranc	ce
	Yes. I	Name the insurance	company o Company		olicy and list its value.		Beneficiary:		Surrender or refund value:
			Term Lif		ance Policy w/ Knig	hts			\$0.00
			Whole li	fe - Bor	rowed all Equity				\$0.00
33.	If you a someon ■ No □ Yes. Claims Examp	are the beneficiary of ne has died. Give specific informa against third partie	a living trus ation	st, expec		surance pol	icy, or are currently entitle	ed to recei	ve property because
	■ No □ Yes.	Describe each claim	1						

		Case 17-24429	Doc 1	Filed 08/15/17 Document	Entered 0 Page 15 of	8/15/17 16:38:06 50	Desc Main
Debi		Michael Albano Deborah Albano		Document	r age 10 or	Case number (if known)	
	Other o	contingent and unliquidate	ed claims of	every nature, including	g counterclaims	of the debtor and rights to	set off claims
		Describe each claim					
_		ancial assets you did not	already list				
	No 1 Voc	Give specific information					
_	1 163.	Give specific information					
36.		he dollar value of all of yo art 4. Write that number he				-	\$93,301.12
Part	5: Des	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real esta	ate in Part 1.	
37. D	o vou c	own or have any legal or equi	table interest i	n any business-related p	operty?		
	-	to Part 6.		,			
	Yes. G	So to line 38.					
Part		scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interes	st In.	
46 F	ייטע א	ı own or have any legal or	equitable in	terest in any farm- or (commercial fishir	na-related property?	
		Go to Part 7.	equitable iii	torest in any farin or t		ig related property.	
	_	. Go to line 47.					
Part	7:	Describe All Property You	Own or Have a	n Interest in That You Dic	Not List Above		
53. C	Do you	have other property of ar	ny kind you d	did not already list?			
_	_ ′	oles: Season tickets, country	club membe	ership			
	No	0					
	ı Yes.	Give specific information	••••				
54.	Add t	he dollar value of all of yo	ur entries fr	om Part 7. Write that n	umber here		\$0.00
Part	8:	List the Totals of Each Part of	of this Form				
							4
55.		: Total real estate, line 2					\$205,680.00
56. 57.		2: Total vehicles, line 5 3: Total personal and hous	ahald itama		\$24,825.00		
57. 58.		l: Total financial assets, li			\$2,500.00 \$93,301.12		
59.		i: Total hilancial assets, in		 • 45	\$0.00		
60.		6: Total farm- and fishing-เ			\$0.00		
61.		7: Total other property not			\$0.00		
60						Convinced and and the	otol #400 000 10
62.	ıotal	personal property. Add lin	es 56 throug	n 61	\$120,626.12	Copy personal property to	otal \$120,626.12
63.	Total	of all property on Schedu	le A/B. Add I	ine 55 + line 62			\$326,306.12

Official Form 106A/B Schedule A/B: Property page 6

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			III FAUE 10 01 39	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Michael Albano			
	First Name	Middle Name	Last Name	
Debtor 2	Deborah Albano			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2015 Chrysler TC 147000 miles Motor Vehicle:	\$18,825.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Misc. Household Goods (Bedroom Furniture, Kitchen Appliances,	\$1,100.00		\$1,100.00	735 ILCS 5/12-1001(b)
tables, chairs, sofas) Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Consumer Electronics (Including Televisions, Radios, Computers,	\$350.00		\$350.00	735 ILCS 5/12-1001(b)
Games, Phones, Stereos) Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$50.00		100%	735 ILCS 5/12-1001(a)
Ellie Holli Golloddio 702.			100% of fair market value, up to any applicable statutory limit	
Misc. Costume Jewelry Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
LING HOTH GOLIEGUIG FVD. 14.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 **Deborah Albano** Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash on Hand 735 ILCS 5/12-1001(b) \$20.00 \$0.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: First Community Bank and** 735 ILCS 5/12-1001(b) \$2,879.48 \$2,879.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: First Community Bank 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Teacher Retirement - 100% exempt 735 ILCS 5/12-1006 100% \$50,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Retirement Account** 735 ILCS 5/12-1006 \$40,000.00 \$40,000.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Michael Albano

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		Document P	Page 18	of 59		
Fill in this inform	ation to identify you	r case:				
Debtor 1	Michael Albano					
202101 1	First Name	Middle Name La	ast Name			
Debtor 2	Deborah Albano					
(Spouse if, filing)	First Name	Middle Name La	ast Name			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILLING	OIS			
Crinica Glates Barr	Kruptoy Court for the.	TOTAL PROPERTY OF THE PROPERTY				
Case number						
(if known)					☐ Check	if this is an
					amen	ded filing
O#: -: - F	400D					
Official Form	106D					
Schedule I	D: Creditors	Who Have Claims Se	ecured	by Propert	y	12/15
De se semulate and	annumeta an manaible. If	force magnified magnification filling to gother t	hath ara arr	ally recommendate for a		tion If mars space
		f two married people are filing together, but, number the entries, and attach it to the				
number (if known).	<u> </u>					
1. Do any creditors h	nave claims secured by	your property?				
☐ No. Check	this box and submit th	is form to the court with your other sch	nedules. You	u have nothing else t	o report on this form.	
Ves Fill in	all of the information b	nelow.				
		ociow.				
Part 1: List All	Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the creditor a particular claim, list the other creditors in l			Value of collateral	Unsecured
		cal order according to the creditor's name.		Amount of claim Do not deduct the	that supports this	portion
	·	-		value of collateral.	claim	If any
2.1 California Creditor's Name	Republic Bk	Describe the property that secures the	claim:	\$6,571.00	\$6,000.00	\$571.00
Creditor's Name		2009 Ford Flex 115000 miles				
Attn: Lega	l Dont					
Po Box 56	•	As of the date you file, the claim is: Chec	ck all that			
Hercules, (apply. Contingent				
	City, State & Zip Code	☐ Unliquidated				
rumber, otreet,	ony, ciate a zip code	☐ Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mort	taage or secu	red		
,		car loan)	igago oi occa			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 1	otor 2 only	Ctatutary lian (auch as tay lian, machar	niola lian)			
_	e debtors and another	☐ Statutory lien (such as tax lien, mechar ☐ Judgment lien from a lawsuit	nic's lien)			
☐ Check if this cla		Other (including a right to offset)				
community deb		— Other (including a right to onset)				
-						
	Opened					
	03/17 Last Active					
Date debt was incu		Last 4 digits of account number	1001			
2.2 Chase		Describe the property that secures the	claim:	\$31,486.00	\$205,680.00	\$0.00
Creditor's Name		270 Mallard's Cove Beecher, IL		ψ51,400.00	Ψ200,000.00	Ψ0.00
Attn: Corre	espondence	60401 Will County	•			
Dept	Soponachec	•				
Po Box 152	298	As of the date you file, the claim is: Checapply.	ck all that			
Wilmingoti	n, DE 19850	☐ Contingent				
Number, Street, 0	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mort	tgage or secu	red		
Debtor 2 only		car loan)				
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit				

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Debtor 1 Michael Albano		Case number (if know)		
First Name Middle N	lame Last Name	•		
Debtor 2 Deborah Albano				
First Name Middle N	lame Last Name			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 07/06 Last Active	Last 4 digits of account number 8685			
Date debt was incurred 5/15/17	Last 4 digits of account number 8083	<u> </u>		
2.3 Chase Mortgage	Describe the property that secures the claim:	\$135,569.00	\$205,680.00	\$0.00
Creditor's Name	270 Mallard's Cove Beecher, IL 60401 Will County	<u> </u>		,
3415 Vision Dr	As of the date you file, the claim is: Check all that apply.			
Columbus, OH 43219	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 6/01/11 Last Active Date debt was incurred 6/08/17	Last 4 digits of account number 0327	,		
2.4 Chrysler Capital	Describe the property that secures the claim:	\$22,939.00	\$18,825.00	\$4,114.00
Creditor's Name	2015 Chrysler TC 147000 miles Motor Vehicle:		· -	·
PO Box 961275	As of the date you file, the claim is: Check all that			
Fort Worth, TX 76161	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 11/14 Last Active 7/23/17	Last 4 digits of account number)		
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$196,565.0	<u>n</u>]	
If this is the last page of your form, add				
Write that number here:		\$196,565.0	<u>U</u>	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is

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Debtor 1	Michael Albano			Case number (if know)	
•	First Name	Middle Name	Last Name		
Debtor 2	Deborah Albano				
•	First Name	Middle Name	Last Name		

trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 11-24429	Document	Page 21 of 59	esc Main
Fill in t	his information to identify your			
Debtor	1 Michael Albano			
	First Name	Middle Name	Last Name	
Debtor				
(Spouse i	f, filing) First Name	Middle Name	Last Name	
United	States Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case n	umber			
(if known)				Check if this is an
				amended filing
Offici	al Form 106E/F			
Sche	dule E/F: Creditors V	Vho Have Unsecure	d Claims	12/15
any exec Schedule Schedule left. Atta	cutory contracts or unexpired lease e G: Executory Contracts and Unex e D: Creditors Who Have Claims Se ch the Continuation Page to this pa d case number (if known).	s that could result in a claim. Also pired Leases (Official Form 106G) cured by Property. If more space i ge. If you have no information to	RITY claims and Part 2 for creditors with NONPRIORITY of o list executory contracts on Schedule A/B: Property (Of . Do not include any creditors with partially secured clai is needed, copy the Part you need, fill it out, number the report in a Part, do not file that Part. On the top of any ac	ficial Form 106A/B) and on ms that are listed in entries in the boxes on the
Part 1:	List All of Your PRIORITY U	nsecured Claims		
1. Do	any creditors have priority unsecur	ed claims against you?		
	No. Go to Part 2.			
	Yes.			
Part 2:	List All of Your NONPRIORI	TY Unsecured Claims		
3. Do	any creditors have nonpriority unse	ecured claims against you?		
	No. You have nothing to report in this	part. Submit this form to the court wi	ith your other schedules.	
	Yes.			
4. List	t all of your nonpriority unsecured of ecured claim, list the creditor separate n one creditor holds a particular claim,	ely for each claim. For each claim list	the creditor who holds each claim. If a creditor has more ted, identify what type of claim it is. Do not list claims already u have more than three nonpriority unsecured claims fill out	included in Part 1. If more the Continuation Page of
				Total claim
4.1	A Step Ahead Pediatric The	erapy Last 4 digits of a	ccount number	\$145.00
	Nonpriority Creditor's Name 486 William Lathan Dr 6B	When was the de	ebt incurred?	
	Bourbonnais, IL 60914			
	Number Street City State Zlp Code		ou file, the claim is: Check all that apply	
	Who incurred the debt? Check one	ı.		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and ar	nother Type of NONPRIO	ORITY unsecured claim:	
	☐ Check if this claim is for a com	munity		
	debt	☐ Obligations ari	sing out of a separation agreement or divorce that you did no	ot
	Is the claim subject to offset?	report as priority o		
	No	☐ Debts to pensi	on or profit-sharing plans, and other similar debts	
	Yes	Other. Specify		

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Debtor Debtor	1 Michael Albano 2 Deborah Albano		Case number (if know)					
4.2	Afni	Last 4 digits of account number	8134	\$2,469.00				
	Nonpriority Creditor's Name Po Box 3427 Bloomington, IL 61702	When was the debt incurred?	Opened 03/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plans, and other similar debts					
	■ No □ Yes	· ·	Attorney Osf Lifeline Services					
	Tes Tes	Other. Specify	Attorney Osi Ellenne Services					
4.3	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	5509	\$3,371.00				
	100 S West St Wilmington, DE 19801	When was the debt incurred?	Opened 10/10 Last Active 6/01/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim						
	■ Debtor 1 only	☐ Contingent	☐ Contingent					
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharing						
	□ Yes	■ Other Specify Credit Card						
4.4	Chase Card	Last 4 digits of account number	2136	\$7,561.00				
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/05 Last Active 5/26/17	**,******				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim						
	Debtor 1 only	☐ Contingent						
	■ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa						
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir						
	□ Yes	Other. Specify Credit Card						
		· · · ———						

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Debtor Debtor	Michael Albano Deborah Albano		Case number (if know)	
4.5	Chase Card	Last 4 digits of account number	7206	\$5,959.00
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim i	Opened 08/09 Last Active 5/22/17	, ,,,,,,
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify ☐ Credit Card	ration agreement or divorce that you did not g plans, and other similar debts	
4.6	Chase Card	Last 4 digits of account number	1376	\$5,323.00
4.0	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 02/14 Last Active 5/19/17	\$3,323.00
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.7	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	1168	\$2,786.00
	Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 07/06 Last Active 5/26/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	

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Debtor Debtor	1 Michael Albano 2 Deborah Albano		Case number (if know)	
4.8	Citibank	Last 4 digits of account number	2234	\$5,985.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129	When was the debt incurred?	Opened 10/14 Last Active 5/27/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	6865	\$19,102.00
	Citicorp Credit Svc/Centralized Bankrupt Po Box 790040	When was the debt incurred?	Opened 08/94 Last Active 6/03/17	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	·	э. Опеск ан тагарру	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 0	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	2918	\$10,000.00
	Citicorp Credit Svc/Centralized Bankrupt Po Box 790040	When was the debt incurred?	Opened 07/04 Last Active 5/05/17	
	Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card		
		- Outer, opening		

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Debtor 1 Michael Albano Debtor 2 Deborah Albano Case number (if know) 4.1 3846 Costco Go Anywhere Citicard \$4,991.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/16 Last Active Centralized Bk/Citicorp Credit Card Srvs When was the debt incurred? 5/13/17 Po Box 790040 St Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.1 **Discover Financial** 7224 \$9,551.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/04 Last Active Po Box 3025 When was the debt incurred? 5/31/17 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 **Discover Financial** 1047 \$788.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 05/89 Last Active Po Box 3025 When was the debt incurred? 5/23/17 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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ebtc	r 2 Deborah Albano	Case number (if know)	
1	Francisco Alliente Inc		\$227.00
	Franciscan Alliance, Inc	Last 4 digits of account number	\$237.00
	Nonpriority Creditor's Name 28044 Network PI	When was the debt incurred?	
	Chicago, IL 60673-1280		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
7			
	Illinois Department of Revenue	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name Bankruptcy Section	When was the debt incurred?	
	PO Box 64338	Then was the dest insurred.	
	Chicago, IL 60664-0338		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice Only	
1	Illinois Dept of Employment Securit	Last 4 digits of account number Notic Only	Unknown
╛	Nonpriority Creditor's Name	Last 4 digits of account number Notic Only	Olikilowii
	Bankruptcy Unit Collection	When was the debt incurred?	
	Subdivis		
	33 S State St 10th Floor Chicago, IL 60603		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Notice Only	

Debtor 1 Michael Albano

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Debtor Debtor	1 Michael Albano 2 Deborah Albano		Case number (if know)	
4.1 7	Internal Revenue Service	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name PO Box 7346	When was the debt incurred?		
	Philadelphia, PA 19101-7346 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other Specify Notice Only		
4.1	Kohls/Capital One	Last 4 digits of account number	5008	\$121.00
	Nonpriority Creditor's Name Kohls Credit Po Box 3043	When was the debt incurred?	Opened 11/01 Last Active 7/15/17	
	Milwaukee, WI 53201	— A. (64) - 156 - (61) - (1) - (1)		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1 9	Medicredit Inc. Nonpriority Creditor's Name	Last 4 digits of account number	2382	\$40.00
	Po Box 1629 Maryland Heights, MO 63043	When was the debt incurred?	Opened 11/16 Last Active 3/02/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	o plans, and other similar debts	
	140	Collection	Attorney St Clare Hospital	
	Yes	Other. Specify Baraboo		

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Debtor Debtor	1 Michael Albano2 Deborah Albano	Document 1 age 20	Case number (if know)	
			· ,	
4.2	Rockford Fire Department	Last 4 digits of account number		\$382.00
	Nonpriority Creditor's Name PO Box 8750	When was the debt incurred?		
	Carol Stream, IL 60197			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	П		
	Debtor 2 only	☐ Contingent		
	_	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	☐ Student loans		
	LI Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	· ·	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.2				
1	Synchrony Bank/Sams Nonpriority Creditor's Name	Last 4 digits of account number	3868	Unknown
	Attn: Bankruptcy		Opened 11/29/09 Last Active	
	Po Box 965060	When was the debt incurred?	9/26/10	
	Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	• .	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other. Specify Charge Acc	count	
4.2	Target	Last 4 digits of account number	4164	\$2,959.00
	Nonpriority Creditor's Name		Opened 04/42 Lept Active	
	C/O Financial & Retail Srvs Mailstopn BT POB 9475	When was the debt incurred?	Opened 01/12 Last Active 4/30/17	
	Minneapolis, MN 55440			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	<u> </u>	

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Michael Albano	o						
Deborah Albano	Case number (if know)						
The University of Chicago Medicine	e Last 4 digits of account number	\$7,000.00					
Nonpriority Creditor's Name 33343 Collections Center Dr Chicago, IL 60693	When was the debt incurred?						
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	☐ Student loans						
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did n report as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
No	\square Debts to pension or profit-sharing plans, and other similar debts						
☐ Yes	Other. Specify						
List Others to Be Notified About a De	ebt That You Already Listed						
g to collect from you for a debt you owe to so ore than one creditor for any of the debts that	omeone else, list the original creditor in Parts 1 or 2, then list the collection aga at you listed in Parts 1 or 2, list the additional creditors here. If you do not have	ency here. Similarly, if you					
d Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
	Line <u>4.23</u> of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured	Claims					
	Part 2: Creditors with Nonpriority Unsecu	red Claims					
O, I= 00007	Last 4 digits of account number						
	Deborah Albano The University of Chicago Medicin Nonpriority Creditor's Name 3343 Collections Center Dr Chicago, IL 60693 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes List Others to Be Notified About a Despace only if you have others to be notified to collect from you for a debt you owe to so one than one creditor for any of the debts the for any debts in Parts 1 or 2, do not fill out	Deborah Albano Case number (if know) The University of Chicago Medicine Nonpriority Creditor's Name 33343 Collections Center Dr Chicago, IL 60693 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community lebt stee claim subject to offset? No No Debtor 3 only Other. Specify List Others to Be Notified About a Debt That You Already Listed List Others to Be Notified About a Debt That You Already Listed List Others 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Parts 2 did you list the original creditors here. If you do not have for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditors with Priority Unsecured Line 4.23 of (Check one): Part 2: Creditors with Nonpriority Unsecured Line 4.23 of (Check one): Part 2: Creditors with Nonpriority Unsecured Line 4.23 of (Check one): Part 2: Creditors with Nonpriority Unsecured Line 4.25 or Case number (if know) When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply I check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you fil					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 88,770.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 88,770.00

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		DOCUME	ni Pane 30 oi 59	
Fill in this infor	mation to identify your	case:		
Debtor 1	Michael Albano			
	First Name	Middle Name	Last Name	
Debtor 2	Deborah Albano			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	<u> </u>		<u> </u>		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5	City		Oldio	211 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Docume	nt Page 31 d	of 59
Fill in this in	formation to identify your	case:		
Debtor 1	Michael Albano			
200101 1	First Name	Middle Name	Last Name	
Debtor 2	Deborah Albano			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Schedu Codebtors and Deople are fill ill it out, and Your name and	ing together, both are equa	re also liable for any deb ally responsible for supp boxes on the left. Attach . Answer every question	llying correct informat the Additional Page t	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write as a codebtor.
■ No. Go □ Yes. □ 3. In Columin line 2	again as a codebtor only i	ise, or legal equivalent live ors. Do not include your f that person is a guaran	with you at the time? spouse as a codebtor tor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil
out Colu		,		
	Jumn 1: Your codebtor ne, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
Nar	ne			☐ Schedule E/F, line
				☐ Schedule G, line
Nur	mber Street			_
City		State	ZIP Code	
3.2				☐ Schedule D, line
Nan	ne			☐ Schedule E/F, line
				☐ Schedule G, line
Nice	mber Street			_
City		State	ZIP Code	

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Fill	in this information to identify your c	ase:						
Del	otor 1 Michael Alb	ano			_			
	otor 2 Deborah All	oano						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRI	CT OF ILLINOIS					
	se number 		-			Check if this is: An amended A supplement	ed filing	ng postpetition chapter
_	W: E 400							ollowing date:
	fficial Form 106l					MM / DD/ Y	YYY	
_	chedule I: Your Inc							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing w	ith you, do not inclu	de infor	matio	on about your spo	ouse. If m	ore space is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fi	iling spouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed			☐ Emple	oyed	
	information about additional	p.o,	☐ Not employed			■ Not e	mployed	
	employers.	Occupation	Med Tech					
	Include part-time, seasonal, or self-employed work.	Employer's name	Bio Medic Incor	orated				
	Occupation may include student or homemaker, if it applies.	Employer's address						
		How long employed t	here? 11 Year	's				
Par	t 2: Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any l	ine, write \$0 in the	space. In	clude your non-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	emplo	yers for that perso	on on the li	ines below. If you need
						For Debtor 1		ebtor 2 or ing spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,116.67	\$	0.00
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00

4. Calculate gross Income. Add line 2 + line 3.

\$

0.00

4,116.67

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	otor 1 otor 2	Michael Albano Deborah Albano	_	(Case	e number (<i>if known</i>)				
					Foi	r Debtor 1		r Debtor n-filing s		
	Cop	y line 4 here	4.		\$_	4,116.67	\$_		0.00	_
5.	List	all payroll deductions:								
-	5a.	Tax, Medicare, and Social Security deductions	5a	,	\$	884.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b		\$-	0.00	\$_		0.00	-
	5c.	Voluntary contributions for retirement plans	5c		\$ -	0.00	\$-		0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.00	\$		0.00	_
	5e.	Insurance	5e) .	\$	0.00	\$		0.00	-
	5f.	Domestic support obligations	5f.		\$	0.00	\$		0.00	_
	5g.	Union dues	5g	J.	\$	0.00	\$		0.00	-
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.00	+ \$ _		0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	884.00	\$_		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,232.67	\$_		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$ -	0.00	\$ \$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$_	0.00	\$		0.00	-
	8d.	Unemployment compensation	8d	i.	\$	0.00	\$		0.00	-
	8e.	Social Security	8e	€.	\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	0.00	\$_		0.00	
	8g.	Pension or retirement income	8g		\$_	0.00	\$_		0.00	_
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0.00	+ \$_		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	0.00	\$_		0.00	O
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,232.67 + \$		0.00	- \$	3,232.67
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		<u>σ,232.07</u> · ψ_		0.00		3,232.07
11.	Star Inclination	te all other regular contributions to the expenses that you list in Schedule dude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•	-			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies						e. 12.	\$Combin	
13.	. Do	you expect an increase or decrease within the year after you file this form	?						monthl	y income
		Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

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Eillei	n this informa	ation to identify you	r case.						
		-							
Debt	Debtor 1 Michael Albano				Check if this is: An amended filing				
	btor 2 Deborah Albano bouse, if filing)			A supplement showing postpetition ch 13 expenses as of the following date:					
Unite	ed States Bankr	ruptcy Court for the:	NORTHERN DISTRICT OF ILLING	OIS		MM / DD / YYYY			
Case number (If known)									
(11 14									
		orm 106J							
		J: Your E	XPENSES ossible. If two married people are	e filing together be	oth are equ	ally responsible fo	12/1		
info	rmation. If m nber (if know	nore space is need n). Answer every	ded, attach another sheet to this f question.	form. On the top of	any additi	onal pages, write y	our name and case		
1.	Is this a joir		olu						
	☐ No. Go to	o line 2.							
	Yes. Doe	es Debtor 2 live in	a separate household?						
	■ N □ Y		file Official Form 106J-2, Expenses	for Separate House	hold of Deb	tor 2.			
2.	Do you have	e dependents?	□ No						
۷.		obtor 1 and	Eill out this information for	Donandant's relati	onshin to	Dependent's	Doos dependent		
	Do not list Do Debtor 2.	ebior rand	Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		age	Does dependent live with you?		
	Do not state	the					□ No		
	dependents	names.		Child		2	Yes		
				Child		4	□ No		
				Child			■ Yes		
				Child		7	□ No ■ Yes		
				Office			■ Yes □ No		
				Child		13	■ Yes		
3.	expenses o	penses include f people other tha d your dependent							
exp	mate your ex	xpenses as of you a date after the ba	g Monthly Expenses ir bankruptcy filing date unless y inkruptcy is filed. If this is a supp	ou are using this fo lemental S <i>chedule</i>	orm as a su J, check tl	ipplement in a Cha ne box at the top o	pter 13 case to report f the form and fill in the		
the		h assistance and	on-cash government assistance if have included it on <i>Schedule I:</i> Y			Your exp	enses		
4.	The rental or home ownership expenses for your residence. Include first mortgag				e		4 724 00		
	payments and any rent for the ground or lot.			4. \$		1,721.00			
	If not includ	ded in line 4:							
	4a. Real e	estate taxes			4a. \$	5	0.00		
	•	• .	or renter's insurance		4b. \$		0.00		
	4c. Home	: maintenance, repa	air, and upkeep expenses		4c. S		0.00		

4d. \$

5. \$

0.00

0.00

4d. Homeowner's association or condominium dues

Additional mortgage payments for your residence, such as home equity loans

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Debto Debto		Michael Deborah		Case num	ber (if known)	
6.	Utilit	ies:				
(6a.	Electricity,	heat, natural gas	6a.	\$	100.00
	6b.	Water, sev	ver, garbage collection	6b.	\$	0.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food		ekeeping supplies	7.	\$	200.00
			hildren's education costs	8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	10.00
		•	roducts and services	10.	\$	10.00
		•	ntal expenses	11.	· : ————	10.00
			Include gas, maintenance, bus or train fare.			10.00
			ar payments.	12.	\$	180.00
			clubs, recreation, newspapers, magazines, and book	s 13.	\$	0.00
			ributions and religious donations	14.	\$	0.00
15.	Insu	rance.	•			
	Do no	ot include in	surance deducted from your pay or included in lines 4 or	20.		
	15a.	Life insura	ince	15a.	\$	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle ins	surance	15c.	\$	148.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay or included in lines	1 or 20.		
	Spec		, , ,	16.	\$	0.00
			ease payments:			
	17a.	Car payme	ents for Vehicle 1	17a.	\$	441.00
	17b.	Car payme	ents for Vehicle 2	17b.	\$	212.00
	17c.	Other. Spe	ecify:	17c.	\$	0.00
	17d.	Other. Spe	ecify:	17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that you did n	ot report as		
			your pay on line 5, Schedule I, Your Income (Official I		·	0.00
19.	Othe	er payments	s you make to support others who do not live with yo	u.	\$	0.00
	Spec	,		19.		
			erty expenses not included in lines 4 or 5 of this form			
	20a.	Mortgages	s on other property	20a.	· -	0.00
:	20b.	Real estat	e taxes	20b.	·	0.00
	20c.	Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
:	20d.	Maintenan	ice, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
00	0-1-					
		-	monthly expenses			
		Add lines 4	· · ·		\$	3,232.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2	\$	
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	3,232.00
22	Calc	ulata vaur i	monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.	¢	2 222 67
			monthly expenses from line 22c above.	23a. 23b.		3,232.67
	230.	Copy your	monthly expenses from the 22c above.	230.	-Ф	3,232.00
	23c	Subtract v	our monthly expenses from your monthly income.			
	256.		is your <i>monthly net income</i> .	23c.	\$	0.67
		THE TOTAL	.o you. Morning not moonto.		L	
24.	Do y	ou expect a	an increase or decrease in your expenses within the	year after you file this	form?	
	For ex	xample, do yo	ou expect to finish paying for your car loan within the year or do y terms of your mortgage?			se or decrease because of a
			tomo or your mongago:			
	■ No		[=			
	□ Ye	es.	Explain here:			

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Fill in this inf	formation to identify your	case:						
Debtor 1	Michael Albano							
	First Name	Middle Name	Las	t Name				
Debtor 2	Deborah Albano							
(Spouse if, filing)	First Name	Middle Name	Las	t Name				
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	T OF ILLINO	IS				
Case number	·							
(if known)								
							amended filing	
Official Fo	orm 106Dec							
Declara	ation About a	an Individua	Debt	or's	Schedules		12/15	
f two married	I people are filing togethe	r, both are equally respo	onsible for s	upplyin	g correct information.			
You must file	this form whenever you fi	ile bankruptcy schedule	s or amende	ed sche	dules. Making a false st	atement, co	ncealing property, or	
	ney or property by fraud i		kruptcy cas	e can re	sult in fines up to \$250.	,000, or imp	risonment for up to 20	
years, or both	n. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.						
9	Sign Below							
Did you	pay or agree to pay some	one who is NOT an atto	rney to help	you fill	out bankruptcy forms?			
■ No								
☐ Yes						Bankruptcy Petition Preparer's Notice,		
					Declarati	ion, and Sign	nature (Official Form 119)	
	enalty of perjury, I declare are true and correct.	that I have read the sun	nmary and s	chedule	es filed with this declara	tion and		
triat triey	are true and correct.							
X /s/ N	lichael Albano		X	/s/ De	borah Albano			
	nael Albano				rah Albano			
Signa	ature of Debtor 1			Signati	ure of Debtor 2			
Date	August 15, 2017			Date	August 15, 2017			

E:II :	n this inform	nation to identify you				
		nation to identify you	Case:			
Deb	tor 1	Michael Albano First Name	Middle Name	Last Name		
Deb	tor 2	Deborah Albano				
(Spou	ise if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case (if kno	e number _				_	heck if this is an
Sta Be as	s complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
		n). Answer every ques		uns form. On the top of an	y additional pages, write you	ii name and case
Part			rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	is?			
	☐ Married■ Not main	ried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	at all of the places you l	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$28,812.00	■ Wages, commissions, bonuses, tips	\$33,530.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Debtor 2			200401	Cas	se number (if known)		
			D 14 4		5.17		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	calendar yea y 1 to Decemi		☐ Wages, commissions, bonuses, tips	\$40,000.00	☐ Wages, combonuses, tips	nmissions,	\$56,000.00
			☐ Operating a business		Operating a	business	
	calendar year y 1 to Decemb		☐ Wages, commissions, bonuses, tips	\$39,000.00	☐ Wages, con bonuses, tips	nmissions,	\$55,000.00
			☐ Operating a business		☐ Operating a	business	
		nd the gross inco	se and you have income that yome from each source separate	•	that you listed in lir		
			Debtor 1	O i f	Debtor 2		O
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3:	List Certain	Payments You	Made Before You Filed for I	Bankruptcy			
•	No. Neithe individual During * Subj Yes. Debtor During No. * Neithe individual No. * No.	the 90 days before. Go to line 7 es List below expaid that or not include ect to adjustment of the 90 days before. Tor Debtor 2 of the 90 days before. Go to line 7 es List below expaid that or not include ect to adjustment of the 90 days before. List below expanding attorney for	each creditor to whom you pai editor. Do not include paymen payments to an attorney for the ton 4/01/19 and every 3 years or both have primarily consultance you filed for bankruptcy, discovered and the creditor to whom you pai ments for domestic support of this bankruptcy case.	Imer debts. Consumer debtd purpose." d you pay any creditor a totatd a total of \$6,425* or more the for domestic support oblinis bankruptcy case. Is after that for cases filed or imer debts. d you pay any creditor a totatd a total of \$600 or more an oligations, such as child support of the purpose.	in one or more pay gations, such as cl or after the date of al of \$600 or more? d the total amount port and alimony.	ore? yments and the hild support a property of adjustment. you paid that Also, do not i	ne total amount you ind alimony. Also, do t creditor. Do not nclude payments to an
Cre	editor's Name	and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for
34	ase Mortgag 15 Vision Dr Iumbus, OH			\$5,163.00	\$135,569.00	☐ Mortgaç ☐ Car ☐ Credit C ☐ Loan Ro ☐ Supplie ☐ Other	Card

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Debtor 1 Michael Albano Debtor 2 **Deborah Albano** Case number (if known) **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... paid still owe **Chrysler Capital** \$22,939.00 \$1,323.00 ☐ Mortgage PO Box 961275 ■ Car Fort Worth, TX 76161 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other California Republic Bk \$636.00 \$6,571.00 ■ Mortgage Attn: Legal Dept ☐ Car Po Box 5610 ☐ Credit Card Hercules, CA 94547 ☐ Loan Repayment ■ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Case title Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date

Explain what happened

property

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	btor 1 Michael Albano btor 2 Deborah Albano	Case number	(if known)	
11.	Within 90 days before you filed for bankry accounts or refuse to make a payment be ■ No □ Yes. Fill in the details.	uptcy, did any creditor, including a bank or financial inscause you owed a debt?	stitution, set off any a	mounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	court-appointed receiver, a custodian, or	etcy, was any of your property in the possession of an a another official?	assignee for the bene	fit of creditors, a
	■ No □ Yes			
Par	tt 5: List Certain Gifts and Contributions	1		
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gifts with a total value of more t	han \$600 per person?	•
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co	ptcy, did you give any gifts or contributions with a tota entribution.	al value of more than S	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	·	Dates you contributed	Value
Par	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup or gambling?	etcy or since you filed for bankruptcy, did you lose any	thing because of theft	t, fire, other disaster
	■ No□ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or p	otcy, did you or anyone else acting on your behalf pay or reparing a bankruptcy petition? eparers, or credit counseling agencies for services required		ty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Gleason & Gleason LLC 77 W. Washington, Ste 1218 Chicago, IL 60602 http://chilawyers.com	\$90.00 attorney fees plus \$335.00 court filing fee.	2016	\$425.00

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Debtor 1 Michael Albano
Debtor 2 Deborah Albano

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and va transferred	lue of any prope	erty	Date payment or transfer was made	Amount of payment
	Summit Financial Education Inc 4800 E Flower St Tucson, AZ 85712 http://summitfe.org	Credit Counselin	g		2016	\$9.95
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list	or to make payments t			r transfer any proper	ty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va transferred	lue of any prope	erty	Date payment or transfer was made	Amount of payment
18	Within 2 years before you filed for bankruptcy,	did you sall trade or	otherwise trans	for any nron	erty to anyone other	than property
10.	transferred in the ordinary course of your busi			iei ally prop	erty to arryone, other	than property
	Include both outright transfers and transfers made include gifts and transfers that you have already list. No		e granting of a se	curity interes	t or mortgage on your	property). Do not
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and va property transferre			iny property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No		property to a se	elf-settled tru	st or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and va	lue of the prope	rty transferre	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit I	Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred?	were any financial acc	ounts or instrum	nents held in	your name, or for yo	our benefit, closed,
	Include checking, savings, money market, or o houses, pension funds, cooperatives, associated			f deposit; sh	ares in banks, credit	unions, brokerage
	NoYes. Fill in the details.					
		•	Type of account instrument	clo mo	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	ır before you filed for b	oankruptcy, any	safe deposit	box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Stre State and ZIP Code)		escribe the (contents	Do you still have it?

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Debtor 1 Michael Albano
Debtor 2 Deborah Albano

Case number (if known)

00	dovo vov otorod proporty in a otorogo vnit or pla	ann athau than wavu hama within 1	year before you filed for bonkerinter	9
22.	lave you stored property in a storage unit or pla	ace other than your nome within 1	year before you filed for bankruptcy	?
	No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for S	•		
-				
23.	Oo you hold or control any property that someon for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Informa	,		
For	ne purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or looking substances, wastes, or material into the airegulations controlling the cleanup of these sub	r, land, soil, surface water, ground		
	Site means any location, facility, or property as one own, operate, or utilize it, including disposal s	_	law, whether you now own, operate, o	or utilize it or used
	<i>Hazardous material</i> means anything an environn nazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	substance,
Rep	rt all notices, releases, and proceedings that yo	u know about, regardless of wher	they occurred.	
-		· -	•	
24.	las any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any i	ZIP Code) release of hazardous material?		
	_			
	No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any envi	ronmental law? Include settlements a	and orders.
	No			
	Yes. Fill in the details.			
	Case Title	Court or agency	Nature of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case
Par	11: Give Details About Your Business or Conr	nections to Any Business		
27.	Nithin 4 years before you filed for bankruptcy, d	lid you own a business or have an	ny of the following connections to any	/ business?
	☐ A sole proprietor or self-employed in a tr	•		
	☐ A member of a limited liability company ((LLC) or limited liability partnersh	ip (LLP)	
	_			

Case 17-24429 Doc 1 Filed 08/15/17 Entered 08/15/17 16:38:06 Desc Main Page 43 of 59 Document Debtor 1 Michael Albano Debtor 2 **Deborah Albano** Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Deborah Albano /s/ Michael Albano Michael Albano **Deborah Albano** Signature of Debtor 1 Signature of Debtor 2 **Date** Date August 15, 2017 August 15, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	Fill in this information to identify your case:				
Debtor 1	Michael Albano				
	First Name	Middle Name	Last Name		
Debtor 2	Deborah Albano				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's California Republic Bk name: Description of 2009 Ford Flex 115000 miles property securing debt:	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	■ No □ Yes
Creditor's Chase name: Description of property 60401 Will County securing debt:	 □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ No
Creditor's Chase Mortgage name: Description of property Chase Mortgage 270 Mallard's Cove Beecher, IL 60401 Will County	 □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ No □ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2 Michael Albano Deborah Albano	Case number (if known)	
securing debt:		_
Creditor's Chrysler Capital name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 2015 Chrysler TC 147000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property Motor Vehicle: securing debt:	☐ Retain the property and [explain]:	_
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. U You may assume an unexpired personal property lease in	d in Schedule G: Executory Contracts and Unexpire Inexpired leases are leases that are still in effect; th	e lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		□ Yes

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Debtor 1 Debtor 2	Michael Albano Deborah Albano	Case number (if known)
Part 3:	Sign Below	
	nalty of perjury, I declare that I have indica that is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal
χ /s/ I	Michael Albano	X /s/ Deborah Albano
Mic	hael Albano	Deborah Albano
Sigr	nature of Debtor 1	Signature of Debtor 2
Date	August 15, 2017	Date August 15, 2017

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-24429 Doc 1 Filed 08/15/17 Entered 08/15/17 16:38:06 Desc Main Document Page 51 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Michael Albano 1 re Deborah Albano	Case No.				
	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENSATION OF ATTOR	NEY FOR DE	CBTOR(S)			
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept	\$	940.00			
	Prior to the filing of this statement I have received	\$	90.00			
	Balance Due		850.00			
2.	\$335.00 of the filing fee has been paid.					
3. ′	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
1. ′	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
5.	■ I have not agreed to share the above-disclosed compensation with any other person un	nless they are memb	pers and associates of my law firm			
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
;	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;					
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and		rings thereof;			
•	 d. [Other provisions as needed] a. Analysis of the debtor's financial situation, and rendering advice t petition in bankruptcy; 	to the debtor in o	determining whether to file a			
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;					
	c. Representation of the debtor at the meeting of creditors and confithereof;	rmation hearing	, and any adjourned hearings			
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following so a. Representation of the debtors in any dischargeability actions, judgreeding.		nces, or any other adversary			
	b. Debtor is responsible for the 2 mandatory credit counseling class	ses.				
	c. This fee agreement does not include representation in motions to	redeem.				

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In re	Michael Albano Deborah Albano	Case No.
	Debtor(s)	

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

CERTIFICATION						
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.						
August 15, 2017	/s/ Julie Gleason					
Date	Julie Gleason 6273536					
	Signature of Attorney					
	Gleason & Gleason					
	77 W Washington, Ste 1218					
	Chicago, IL 60602					
	(312) 578-9530 Fax: (312) 578-9524					
	troy@chicagobk.com					
	Name of law firm					



Chapter 7 Information and Advice

Attorney fees \$940 + Court costs \$335 + \$1275 total costs

Payment Plan: 3 payments of \$425-14 all fees are not paid prior to the filing of your case, you will be asked to sign a post-petition fee agreement for services reported after the filing of your case.

Fees Cover: Intake appointment with attorney, petition preparation, representation at your first meeting of creditors, answering creditor calls and requests.

FEES DO NOT COVER: Credit counseling - there are 2 MANDATORY CLASSES. Additional litigation for adversaries, redemptions, defense of motions brought on behalf of a creditor or a trustee, or conversion of a chapter 7 to a chapter 13. You will be charged \$30 to add any creditors after the case is filed. You will be charged \$100 for us to attend a second meeting of creditors if you miss your first meeting. If your case is closed for failure to take the second class, the court will require you to pay \$260 to reopen the case.

Initial here: I understand it is the policy of Gleason and Gleason that I am required to take my second class between case filing and my first 341 meeting of creditors. I understand that if my case closes without discharge and my certificate is dated after the first 341 meeting of creditors it is my responsibility to pay \$260 to reopen it.

Typical dischargeable debts: credit cards, medical bills, utilities, unsecured judgments, reposessions personal loans, payday Loans

Non dischargeable debts: Alimony, child sapport, debts owed under a divorce decree, student loans, traffic tickets, parking tickets, fines, criminal restitution, debt for personal injury or death related to a DUI, overpayment of government benefits, takes. Co-signors are still responsible for debts. Credit card charges over \$500 in the last 90 days and cash advances over \$750 in the last 70 days may not be discharged.

Secured Loans Surrendering: (House|Car|Furniture|Jewelry) If you are surrendering a car or a house you are still responsible, for tickets, code violations, HOA Fees etc until ownership\title is transferred - usually through a sale, like an auction of the car or house. Title is not transferred through the bankruptcy process. You will be responsible for utilities if not disconnected. Loans through municipal credit unions may be secured by pensions. Credit union loans may be cross collateralized with other credit union loans.

Secured Loans Keeping: Initial here:

I understand I must continue to make regular payments on all secured loans I am keeping. I may have to mail in payments as auto debit and check by phone may be disabled until a debt is reaffirmed. I understand I am required to maintain insurance. I understand that if I am keeping a property I must pay all mortgages including but not limited to 2nd mortgages and home equity lines of credit.

Payday Loans/Autodebits Fost dated checks: You must stop them with your bank. It may require closing the bank account.

Utilities: If you bankrupt your utilities they are allowed to charge a deposit for future service and you must pay for any service used after your filing date forward. If you bankrupt a phone or cellular service they may discontinue service.

.Credit reporting: We pull credit reports from Transunion and Experian. We cannot guarantee the accuracy or completeness of the reports. Some creditors do not report to credit bureaus. It is your responsibility to review the report and inform us of any missing bills.

Gleason and Gleason does not perform and this contract does not include any services relating to credit repair or correcting inaccurate credit reports. Credit bureaus may or may not report information regarding payments on cars or real estate you are keeping.

Clients agree that they have received the following documents: copy of this retainer agreement, list of required items to file bankruptcy, debtor's duties as required under sec. 521, notice required by sec 527(a)(2), notice required by sec 527(b). Checks may be deposited electronically. Client agrees to pay reasonable attorney fees if collections become necessary.

Refund Policy: If Client wants to terminate Gleason and Gleason, Client must notify Gleason and Gleason in Writing. Gleason and Gleason will then perform an accounting of time and services performed and issue a refund check (if applicable) within a reasonable time. For the purpose of determining the refund due, Gleason and Gleason's current hourly rate is \$300 an hour for attorney time.

ient X

Attorney

Joint Clienty



Go to website: www.summitte.org



- /• \$14.95 (pick the cheapest option)
 - When it asks you to upgrade click "no thanks"
- When you create an account enter "Gleason" for lawyers name
- AFTER YOU PAY FOR THE CLASS YOU MUST COMPLETE THE CHAT PORTION OF THE CLASS FOR A CERTIFICATE TO BE ISSUED. THE CLASS IS NOT OVER UNTIL YOU SEE YOUR CERTIFICATE.
- They will automatically send us a copy of the certificate.



- Take after getting a case number and before your bankruptcy hearing.
- \$14.95 (Pick cheapest option)
 - Summit will automatically file the certificate with the court when you complete it and they will send us a copy
- If you do not complete the class your case will close at the end, without discharge, and the court charges \$260 to reopen it, file the certificate and receive a discharge.



Chapter 7 Bankruptcy Retainer Agreement

THE UNDERSIGNED CLIENT(S) EMPLOYS AND RETAINS GLEASON AND GLEASON, HEREINAFTER, ATTORNEY TO REPRESENT CLIENT(S) IN FILING A VOLUNTARY CHAPTER 7 BANKRIPTCY PETITION

THE PRE-PETITION SERVICES ATTORNEY WILL PROVIDE ARE CONSULTATION AND ADVICE, CONTACT AND COMMUNICATION WITH CREDITORS, PREPARATION OF THE BANKRUPTCY PETITION, SCHEDULES, STATEMENT OF FINANCIAL AFFAIRS, STATEMENT OF SOCIAL SECURITY NUMBER, MEANS TEST. CLIENT UNDERSTANDS THAT HE/SHE/THEY ARE SOLEY RESPONSIBLE FOR COMPLETING PRE-FILING CREDIT COUNSELING AND MUST OBTAIN A CERTIFICATE WHICH MUST BE FILED WITH THE COURT AT THE TIME OF FILING HIS/HER/THEIR PETITION. CLIENT IS RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SAID COUNSELING.

THE EARNED FEE FOR THE PREPETITION SERVICE IS \$ $-\mathcal{U}$
FILING FEE OF \$ 335.00
TOTAL OF PREPETITION SERVICE AND FILING FEE (PAYABLE TO GLEASON AND GLEASON): \$
RETAINED WITH (CASH CHECK DEBIT LMONEY ORDER) \$ / 425
BALANCE DUE FOR PRE-PETITION ATTORNEY FEES AND FILING FEE \$
AFTER THE BANKRUPTCY CASE IS FILED I UNDERSTAND THAT I WILL BE PRESENTED WITH A SECOND RETAINER
AGREEMENT TO PAY GLEASON AND GLEASON ATTORNEY FEES OF \$FOR POST FILING LEGAL
SERVICES AND HAVE BEEN GIVEN A COPY OF THE PROPOSED AGREEMENT.
LIENT UNDERSTANDS THAT ONCE THE BANKRUPTCY CASE IS FILED THEY WILL NOT BE LEGALLY OBLIGATED FOR ANY OTHER FEES UNLESS AND UNTIL THEY ENTER NTO A SECOND RETAINER AGREEMENT PROMISING TO PAY FEES FOR THE REMAINDER OF MY REPRESENTION IN THIS CASE. CLIENT UNDERSTANDS THAT THEY ARE NOT OBLIGATED TO ENTER INTO AND MAY REFUSE TO SIGN THE SECOND RETAINER AGREEMENT. HOWEVER, GLEASON AND GLEASON RESERVES HE RIGHT TO WITHDRAW FROM REPRESENTATION IN THE EVENT THAT I DO NOT SIGN A SECOND RETAINER WITHIN 10 DAYS OF THE FILING OF MY CASE. CLIENT MAY SEEK OTHER EGAL COUNSEL IF THEY DO NOT WISH TO BE REPRESENTED BY GLEASON AND GLEASON.
UNDERSTAND THAT FEES PAID OR TO BE PAID ARE A FLAT FEE WHICH SHALL IMMEDIATELY BECOME PROPERTY OF GLEASON AND GLEASON IN AN EXCHANGE FOR A COMMITMENT BY GLEASON AND GLEASON TO PROVIDE LEGAL SERVICES. FUNDS WILL BE DEPOSITED INTO THE MAIN BANK ACCOUNT AND USED FOR GENERAL XPENSES OF GLEASON AND GLEASON.
OCAL RULE 2091-1 (B) DISCLOSURE WITHDRAWAL DDITION, AND SUBSTITUTION OF COUNSEL
ALLURE TO PAY - IN A CASE UNDER CHAPTER 7 OF THE BANKRUPTCY CODE, INCLUDING A CASE CONVENTED FROM CHAPTER 13, WHERE (1) HE DEBTOR'S ATTORNEY IAS AGREED TO REPRESENT THE DEBTOR CONDITIONED ON THE DEBTOR ENTERING INTO AN AGREEMENT AFTER THE FILING OF THE CASE TO PAY THE ATTORNEY FOR ERVICES RENDERED AFTER THE FILING OF THE CASE AND (2) THE DEBTOR REFUSES TO ENTER INTO SUCH AN AGREEMENT, THE COURT MAY ALLOW THE ATTORNEY OWITHDRAW FROM REPRESENTATION OF THE DEBTOR ON MOTION OF THE ATTORNEY. ATTORNEY JOINT CLIENT JOINT CLIENT

77 W WASHINGTON, STE 1218 CHICAGO, IL 60602 | (312) 445-8825 | CHILAWYERS.COM | OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

A Step Ahead Pediatric Therapy 486 William Lathan Dr 6B Bourbonnais, IL 60914

Afni Po Box 3427 Bloomington, IL 61702

Barclays Bank Delaware 100 S West St Wilmington, DE 19801

California Republic Bk Attn: Legal Dept Po Box 5610 Hercules, CA 94547

Chase Attn: Correspondence Dept Po Box 15298 Wilmingotn, DE 19850

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Mortgage 3415 Vision Dr Columbus, OH 43219

Chrysler Capital PO Box 961275 Fort Worth, TX 76161

Citibank Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179 Costco Go Anywhere Citicard Centralized Bk/Citicorp Credit Card Srvs Po Box 790040 St Louis, MO 63179

Discover Financial Po Box 3025 New Albany, OH 43054

Franciscan Alliance, Inc 28044 Network Pl Chicago, IL 60673-1280

Harris & Harris 111 W Jackson #400 Chicago, IL 60604

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Medicredit Inc. Po Box 1629 Maryland Heights, MO 63043

Rockford Fire Department PO Box 8750 Carol Stream, IL 60197

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

The University of Chicago Medicine 33343 Collections Center Dr Chicago, IL 60693

United States Bankruptcy Court Northern District of Illinois

In re	Michael Albano Deborah Albano		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors:		23		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Date:	August 15, 2017	/s/ Michael Albano				
		Michael Albano				
		Signature of Debtor				
Date:	August 15, 2017	/s/ Deborah Albano				
		Deborah Albano				
		Signature of Debtor				